700 Exposition Park Drive Los Angeles, CA 90037 <u>HR@cscmail.org</u>

HR@cscmail.org www.californiasciencecenter.org



DATE: ______ PLEASE PRINT ALL INFORMATIO

PLEASE PRINT ALL INFORMATION								
PERSONAL INFORMATION								
LAST NAME	FIRST NAME	MIDDLE NAME		_				
PRESENT ADDRESS	CITY	STATE	ZIP C	ODE				
PERMANENT ADDRESS (IF	PERMANENT ADDRESS (IF DIFFERENT FROM PRESENT ADDRESS)							
HOME PHONE:	CELL PHONE:							
E-MAIL ADDRESS:								
HAVE YOU EVER BEEN AN EMPLOYEE OR VOLUNTEER OF THE CALIFORNIA SCIENCE CENTER OR THE CALIFORNIA MUSEUM OF SCIENCE AND INDUSTRY? NO YES IF YES, WHEN?								
ARE YOU CURRENTLY EM	PLOYED?YesNo IF SO, MAY WE CO	ONTACT YOUR CURREN	TEMPLOYER?Yes	No				
NAMES OF RELATIVES EM	PLOYED BY THIS ORGANIZATION							
NAME	RELATIONSHIP:	DEPARTMENTDEPARTMENT						
IF HIRED, WOULD YOU HA	VE RELIABLE MEANS OF TRANSPORTATION TO AND	FROM WORK?	_Yes No					
ARE YOU AT LEAST 18 YEA	ARS OLD? (If under 18, hire is subject to verification that	you are of minimum legal a	age.) Yes No					
IF HIRED, CAN YOU PRESENT EVIDENCE OF YOUR U.S. CITIZENSHIP OR PROOF OF YOUR LEGAL RIGHT TO LIVE AND WORK IN THIS COUNTRY? YesNo								
EMPLOYMENT DESIRED								
POSITION (S) APPLYING FOR: SALARY DESIRED: Regular Full-time work Regular Part-Time work Temporary work, e.g., summer or holiday work								
WHAT DAYS AND HOURS ARE AVAILABLE FOR WORK?								
AVAILABLE FOR WORK ON WEEKENDS AVAILABLE TO WORK OVER-TIME, IF NECESSARY IF HIRED, ON WHAT DATE CAN YOU START WORK? HOW WERE YOU REFERRED TO US?								
TYPE OF SCHOOL NAME AND ADDRESS, CITY & STATE YRS. COMPLETED GRADUATED? DEGREE OR DIPLOMA								
	NAME AND ADDRESS, STIT & STATE	TRO. COMIT ELTED	GRADONIED:	DEGREE OR DII EGIIIA				
HIGH SCHOOL				_				
COLLEGE/UNIVERSITY								
VOCATIONAL/BUSINESS								
MANY OF OUR GUESTS DO NOT SPEAK ENGLISH. DO YOU SPEAK, WRITE OR UNDERSTAND ANY FOREIGN LANGUAGES? YES NO If so, which language(s)								
	R EXPERIENCE, TRAINING, QUALIFICATIONS OR NCE CENTER?YESNOIf so, ple	SKILLS, WHICH YOU FE ase explain	EEL, MAKES YOU ESPE	CIALLY SUITED FOR WORK				

	I present and past employmen if attaching a resume. ATTAC			_	unt for all periods of em	ployment. You must complete this	
	(` ,			_PHONE_		
TYPE OF BU	USINESS	IMME[DIATE SUPERVISOR		DATES OF	EMPLOYMENT	
YOUR POSI	ITION AND DUTIES					To:	
REASON FO	OR LEAVING				Full-Tim	e Part-Time	
	tact this employer for referen	nce? Yes No					
,	. ,						
EMPLOYER	<u> </u>	ADDR	ESS		PHONE_		
TYPE OF BU	TYPE OF BUSINESSIMMEDIATE SUPERVISOR					DATES OF EMPLOYMENT	
YOUR POSI	ITION AND DUTIES				From:	From:To:Full-Time Part-Time	
REASON FO	OR LEAVING				Full-Tim		
	tact this employer for referen						
EMDI OVED)	ADDR	ESS		DHONE		
			DIATE SUPERVISOR				
			DIATE GOI ERVIGOR		DATES OF	DATES OF EMPLOYMENT From:To:	
						 e Part-Time	
						<u> </u>	
May we cont	tact this employer for referen	nce? Yes No					
			DEFEDENCE				
List below t	three persons not related to	o you who have knowle	REFERENCES adge of your work performance	e within the last	threes years.		
	NAME		ADDRESS & PHONE		OCCUPATION	NO. OF YRS ACQUAINTED	
			PRE-EMPLOYMENT STATE	EMENT:			
Please read c	arefully, initial each paragraph a	and sign below					
Initials tr	ue and correct to the best o ny omission or misstatement	of my knowledge. I furth t of material fact on this a	ner certify that I, the undersigned	ed applicant, havused to secure er	e personally complete	I that the answers given by me are ad this application. I understand that bunds for rejection if this application o	
Initials su of m	uitability for employment and, ther information related to n	I, further, authorize the re my work records, withou other persons, corporation	t giving me prior notice of suc	e to the Californi h disclosure. I	a Science Center Four hereby release the C	and other matters related to my adation any and all letters, reports and allfornia Science Center Foundation s or liabilities arising out of or in any	
Initials to er	o create an employment contr mployment is for no definite o cience Center Foundation, ar	ract between me and the or determinable period an nd that no promises or re	California Science Center Found may be terminated at any time presentations contrary to the form	idation. In addition e, with or without regoing are bindi	on, I understand and a t prior notice, at the opi ing on the California So	my employment, if hired, is intended gree that if I am employed, my tion for either myself or the California sience Center Foundation unless ents are superseded by the at-will	
Applicant's S	Signature			 Dat	re		

CALIFORNIA SCIENCE CENTER FOUNDATION

SURVEY/BACKGROUND INVESTIGATION AUTHORIZATION

APPLICANT SURVEY

NOTE: False statements made under pen	alty of perjury may also r	result in crimi	nal prosecution.	
Please answer all of the following questions with "yes" or	"no"			
 Have you ever used, or have been known by any other n Have you ever advised, advocated, taught or been a mer party which teaches the overthrow by force or violence of the second of the s	nber or affiliated with any of the Government of the o Ye explain below.	y group, socie United States es		
BACKGROUND INVESTIGATION / APPI	ICANT CERTIFICA	TION ANI	D AUTHORIZATION	
NOTE: Parent/Guardian consent is required j	for all Youth/Minors, prio	or to conducti	ng the investigation.	
I hereby give the CALIFORNIA SCIENCE CENTER FO understand that the investigation may include inquiry into my past e, criminal background information and driving record. I release supplying such information. I indemnify the CALIFORNIA SCI result from making such investigation. I understand that any false a or which is revealed as a result of this background investigation volunteer opportunities, or other required documents, may be considered, discharge.	mployment, volunteer ac from all liability all positive control of the control of	tivities, educations, comp NDATION attications or description in an	ation, including but not limited to banies, schools, and corporation against any liability, which mig rogatory information made by ray application for employment	to, ns ght ne or
I understand that for Employment Opportunities, the CA previous employers and I authorize those employers to disclose to them from any and all liability, claims, or damages that may dirinformation by any person or party, whether such information is favor	he CALIFORNIA SCII ectly or indirectly result	ENCE CENT t from the us	TER FOUNDATION and relea	se
Should a background investigation be obtained in connects understand that I will receive a copy of the reports, free of charge, address indicated on my employment or volunteer application within	and the report will be de			
I have read and understand the Applicant Disclosure, a copbackground investigation will be conducted, which may include inclimited to, criminal background information and my driving record.				
I declare under penalty of perjury that all statements on knowledge. I further understand that false, misleading or incomplete				ny
Name of Applicant (Print)	Applicant Signature		Date	
Parent/Guardian (Print)	Parent/Guardian Signature		Date	

${\bf COMPLETE\ THIS\ FORM\ AND\ RETURN\ WITH\ YOUR\ APPLICATION }$

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APPLICANT DISCLOSURE

The CALIFORNIA SCIENCE CENTER FOUNDATION will conduct a background investigation. The investigation will be comprehensive and may include inquiry into past employment, volunteer activities, and education, including but not limited to, criminal background information and driving record.

The CALIFORNIA SCIENCE CENTER FOUNDATION has contracted with IMI Data Search, Inc., 275 E. Hillcrest Dr., Suite 100 Thousand Oaks, CA 91360, to conduct the background investigation.

APPLICANT COPY

Keep This Copy for your Records

(PARENT/GUARDIAN SHOULD ALSO RECEIVE A COPY FOR APPLICATIONS SUBMITTED BY YOUTH/MINORS)